

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS

In Re:

Dykes will, Ltd.

§
§
§
§

Debtor(s).

Case No. 04-20974 RSS

UNITED STATES COURTS
SOUTHERN DISTRICT OF TEXAS
FILED

Application for Payment of Unclaimed Funds JUL - 5 2011
and Certificate of Service

David J. Bradley, Clerk of Court

1. I am making application to receive \$ 2539.81, which was deposited as unclaimed funds on behalf of Blackburne & Brown Mortgage Fund I (name of original creditor/debtor).

2. Applicant is entitled to receive the requested funds, has made sufficient inquiry and has no knowledge that any other party may be entitled to, and is not aware of any dispute regarding the funds at issued based upon the following (check the statement(s) that apply):

- a. Applicant is the creditor/debtor named in paragraph 1, and the owner of the funds appearing on the records of this Court, as evidenced by the attached documents.
- b. Applicant is the attorney in fact for the creditor/debtor named in paragraph 1, with authority to receive such funds, or who is authorized by the attached original Power of Attorney to file this application on behalf of the creditor/debtor.
- c. Applicant is the assignee or successor-in-interest of the creditor/debtor named in paragraph 1, or the representative of the assignee or successor-in-interest, as evidenced by the attached documents establishing chain of ownership and/or assignment.
- d. Applicant is a duly authorized corporate officer (if a corporation) or a general partner (if a partnership) and a representative of the creditor/debtor named in paragraph 1.
- e. Applicant is the representative of the estate of the deceased creditor/debtor named in paragraph 1, as evidenced by the attached certified copies of death certificate and other appropriate probate documents substantiating applicant's right to act on behalf of the decedent's estate.
- f. None of the above apply. As evidenced by the attached documents, applicant is entitled to these unclaimed funds because:

3. I understand that pursuant to 18 U.S.C. § 152, I could be fined no more than \$5,000, or imprisoned not more than five years, or both, if I have knowingly and fraudulently made any false statements in this document or accompanying supporting documents. I further understand that any indications of fraud detected by the Court will be turned over to the U.S. Attorney for possible prosecution.
4. I declare under penalty of perjury under the laws of the United States of America that the foregoing statements and information are true and correct.

Dated: 6-29-11

Applicant's Signature

Applicant's Name

Address

Phone:


A. Melone, for ASSET RECOVERY
P.O. Box 4296 TRUST
COSTA MESA, CA 92628
(714) 546-8100

Subscribed and sworn before me this 29th day of June, 2011.


Carly Harmon
Notary Public
State of California
My commission expires Oct. 28, 2014

Attachments: 1. _____
2. _____
3. _____
4. _____

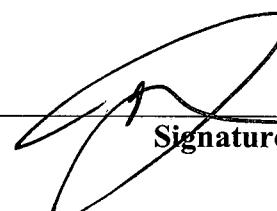
Certificate of Service

I certify that on 6-30-11 (date), a true and correct copy of this application for payment of unclaimed funds was served by first class United States Mail on the following:

U.S. Attorney
P.O. Box 61129
Houston, TX 77208

Other: _____

U.S. Trustee
515 Rusk Ave., Ste.3516
Houston, TX 77002


Signature

**LIMITED POWER OF ATTORNEY/
DECLARATION**

I do hereby grant to **ASSET RECOVERY TRUST**, my sole true and lawful attorney-in-fact for me and in my name, place and stead, giving unto my attorney-in-fact full power to do and perform, on an exclusive basis, all and every act not constituting the practice of law that I may legally do through an attorney-in-fact, for the following limited purpose and for no other:

To reclaim, recover, and return unclaimed funds in the amount of **\$2,539.81** only, less agreed upon fee, to the signatory below.

I do hereby grant my attorney-in-fact every power necessary to carry out the limited purposes for which this limited power of attorney is granted, on an exclusive basis.

This Limited Power of Attorney revokes all previous powers of attorney granted for the purpose of obtaining dividends from this specific bankruptcy case.

I do hereby declare that Blackburne & Sons Realty Capital Corporation, fka Blackburne & Brown Mortgage Company, Inc., is general partner of Blackburne & Brown Mortgage Fund I, a rightful creditor of case 04-20974 RSS, , Dykesville, Ltd., that we are presently located at 4811 Chippendale Dr. #101. Sacramento, CA 95841, that our phone number is 916-338-3232, that the enclosed documents evidencing our identity are true and correct copies of the originals, and that we are entitled to this unclaimed dividend.

I do hereby certify under penalty of perjury under U.S. law that the foregoing is true and correct, and that I have authority to sign for the corporation.

DATED 6/16/11

SIGNED Angelica Gardner

NAME ANGELICA GARDNER

TITLE VICE PRESIDENT

COMPANY Blackburne & Sons Realty Capital Corporation
General Partner of Blackburne & Brown
Mortgage Fund I, L.P.

**SUBSCRIBED AND SWORN TO BEFORE ME THIS 16th DAY OF JUNE, 2011,
TO CERTIFY WITNESS MY HAND AND OFFICIAL SEAL.**

Tim Brannan

NOTARY PUBLIC IN AND FOR SACRAMENTO COUNTY

The State of CALIFORNIA

My Commission expires on MAY 8, 2014



BLACKBURN & SONS

COMMERCIAL MORTGAGE LOANS

Angelica Gardner
Vice President

4811 Chippendale Drive
Suite 101
Sacramento, CA 95841

(916) 338-3232
Fax (916) 338-2328
angelicag@blackburne.com

State of California
Secretary of State



I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

DEC - 2 2009

Debra Bowen

DEBRA BOWEN
Secretary of State

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

AMENDMENT TO THE ARTICLES OF INCORPORATION DEC - 1 2009

The undersigned certifies that:

See Secretary of State's
records for exact entity name.

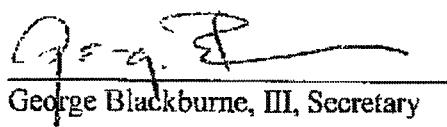
1. He is the president and secretary of Blackburne & Brown Mortgage Company, Incorporated, a California corporation.
2. Article One of the Articles of Incorporation of this corporation is amended to read as follows: The Name of the Corporation is Blackburne & Sons Realty Capital Corporation.
3. The foregoing amendment of Articles of Incorporation has been duly approved by the board of directors.
4. The foregoing amendment of Articles of Incorporation has been duly approved by the required vote of shareholders in accordance with Section 902, California Corporations Code. The total number of outstanding shares of the corporation is 100. The number of shares voting in favor of the amendment equaled or exceeded the vote required. The percentage vote required was more than 50%.

I further declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.

DATE: November 30, 2009



George Blackburne, III, President



George Blackburne, III, Secretary



BLACKBURNE & SONS

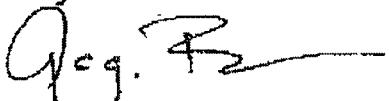
REALTY CAPITAL CORPORATION

CORPORATE RESOLUTION

Be it hereby resolved that Angelica Gardner, Vice President, is authorized to review, and execute on behalf of the company, all contractual obligations, including those extending to the sale or lease of real property, loan contracts and disclosure statements.

Executed this 27th day of May, 2010.

By:



George Blackburne III
Secretary
Blackburne & Sons Realty Capital Corporation

State of California



SECRETARY OF STATE

I, *Kevin Shelley*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

JAN 26 2004

Kevin Shelley
Secretary of State





State of California
Kevin Shelley
Secretary of State

**AMENDMENT TO CERTIFICATE OF LIMITED
 PARTNERSHIP**

A \$30.00 filing fee must accompany this form.

IMPORTANT – Read instructions before completing this form

ENDORSED - FILED
 in the office of the Secretary of State
 of the State of California

JAN 26 2004

KEVIN SHELLEY
 Secretary of State

This Space For Filing Use Only

1. SECRETARY OF STATE FILE NUMBER 199018400032	2. NAME OF LIMITED PARTNERSHIP Blackburn + Brown Mortgage Fund I, a California Limited Partnership			
3. COMPLETE ONLY THE BOXES WHERE INFORMATION IS BEING CHANGED. ADDITIONAL PAGES MAY BE ATTACHED, IF NECESSARY:				
A. LIMITED PARTNERSHIP NAME (END THE NAME WITH THE WORDS "LIMITED PARTNERSHIP" OR THE ABBREVIATION "L.P.")				
B. THE STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 4811 Copperdale Drive, Suite 101	CITY AND STATE SACRAMENTO, CA	ZIP CODE 95841		
C. THE STREET ADDRESS IN CALIFORNIA WHERE RECORDS ARE KEPT 4811 Copperdale Drive, Suite 101	CITY SACRAMENTO	STATE CA	ZIP CODE 95841	
D. THE ADDRESS OF THE GENERAL PARTNER(S)	NAME	ADDRESS	CITY AND STATE	ZIP CODE
E. NAME CHANGE OF GENERAL PARTNER(S)	FROM:	TO:		
F. GENERAL PARTNER(S) CESSION George Blackburn, III				
G. NAME OF GENERAL PARTNER(S) ADDED Blackburn + Brown Mortgage Company, Inc.	ADDRESS	CITY AND STATE 4811 Copperdale Dr. Ste 101 SACRAMENTO CA 95841	ZIP CODE CA	
H. THE PERSON(S) AUTHORIZED TO WIND UP THE AFFAIRS OF THE LIMITED PARTNERSHIP	NAME	ADDRESS	CITY AND STATE	ZIP CODE
I. THE NAME OF THE AGENT FOR SERVICE OF PROCESS				
J. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE CA	ZIP CODE	
K. NUMBER OF GENERAL PARTNERS' SIGNATURES REQUIRED FOR FILING CERTIFICATES OF AMENDMENT, RESTATEMENT, MERGER, DISSOLUTION, CONTINUATION AND CANCELLATION:				
L. OTHER MATTERS (ATTACH ADDITIONAL PAGES, IF NECESSARY):				
4. I DECLARE THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.				
		EXECUTIVE PRESIDENT <i>Blackburn + Brown Mortgage Company, Inc.</i> POSITION OR TITLE OF AUTHORIZED PERSON <i>General Partner</i>		
SIGNATURE OF AUTHORIZED PERSON RICHARD M. CLOWDUS		DATE JANUARY 26, 2004		
TYPE OR PRINT NAME OF AUTHORIZED PERSON		POSITION OR TITLE OF AUTHORIZED PERSON		
SIGNATURE OF AUTHORIZED PERSON				
TYPE OR PRINT NAME OF AUTHORIZED PERSON		DATE		



